

<b>CONTINUATION/DIVISIONAL APPLICATION TRANSMITTAL</b> (Rule 53(b) Continuation or Divisional) <input type="checkbox"/> DUPLICATE																																																					
<b>Address to: Assistant Commissioner for Patents</b> <b>Box PATENT APPLICATION</b> <b>Washington, D.C. 20231</b>			Attorney Docket No.: HITA.0434																																																		
			First Named Inventor: YANAGAWA et al																																																		
			Total Pages:																																																		
This requests a <input checked="" type="checkbox"/> Continuation or <input type="checkbox"/> Divisional application under 37 CFR §1.53(b) of prior application:																																																					
Appln. No.: 10/106,954		Group Art Unit: 2871																																																			
Filed on: March 28, 2002		Examiner: Qi, Zhi Qiang																																																			
Entitled: LIQUID CRYSTAL DISPLAY																																																					
<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> 1. The entire disclosure of the pending, prior application is hereby incorporated by reference.  <input type="checkbox"/> 2. Submitted herewith is a copy of the complete prior application as filed.  <input type="checkbox"/> 3. This application is filed by fewer than all the inventors named in the prior nonprovisional application, 37 CFR 1.53(b)(1). <b>DELETE</b> the following inventor(s): _____  <input checked="" type="checkbox"/> 4. Submitted herewith is a copy of the signed Oath/Declaration from the prior application.  <input type="checkbox"/> 5. Small entity status was established in the prior application, and is still proper and desired.  <input type="checkbox"/> 6. A _____ month Petition for Extension of Time is filed concurrently in the prior application.  <input checked="" type="checkbox"/> 7. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR § 1.16 and/or 1.17 to Deposit Account No. 08-1480.  <input checked="" type="checkbox"/> 8. A check in the amount of \$ <u>790</u> for filing and assignment fees is submitted herewith.  <input checked="" type="checkbox"/> 9. Insert before the first sentence of the specification: This application is a Continuation of nonprovisional application serial number 10/106,954 filed on March 28, 2002.  <input type="checkbox"/> 10. Cancel in this application original claims _____ of prior application before calculating the filing fee.  <input checked="" type="checkbox"/> 11. The prior application is assigned of record to: Hitachi, Ltd.  <input checked="" type="checkbox"/> 12. Priority is claimed based on U.S. Application number 10/106,954 filed on March 28, 2002, which claims the priority of Japanese application 11-029053 filed on February 5, 1999.  <input checked="" type="checkbox"/> 13. A Preliminary Amendment is enclosed.  <input checked="" type="checkbox"/> 14. Other: Information Disclosure Statement along with Form PTO-1449.               </div> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: small;">                 22141 U.S. PRO                  10/659369               </div> </div>																																																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="4" style="text-align: left; padding: 2px;">THE FILING FEE IS CALCULATED AS FOLLOWS:</th> <th style="text-align: right; padding: 2px;">Basic Fee:</th> <th style="text-align: right; padding: 2px;">\$ 750.00</th> </tr> </thead> <tbody> <tr> <td style="text-align: right; padding: 2px;">Total Claims:</td> <td style="text-align: center; padding: 2px;">18</td> <td style="text-align: right; padding: 2px;">-20 =</td> <td style="text-align: center; padding: 2px;">0</td> <td style="text-align: right; padding: 2px;">× \$18 =</td> <td style="text-align: right; padding: 2px;">0.00</td> </tr> <tr> <td style="text-align: right; padding: 2px;">Independent claims:</td> <td style="text-align: center; padding: 2px;">3</td> <td style="text-align: right; padding: 2px;">-3 =</td> <td style="text-align: center; padding: 2px;">0</td> <td style="text-align: right; padding: 2px;">× \$84 =</td> <td style="text-align: right; padding: 2px;">0.00</td> </tr> <tr> <td colspan="4" style="padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <b>REED SMITH LLP</b>                3110 Fairview Park Drive, Suite 1400                Falls Church, VA 22042                Phone: 703-641-4200 Fax: 703-641-4340             </div> <div style="width: 55%;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: right; padding: 2px;">Multiple Dependent Claim (Add \$280.00):</td> <td style="text-align: right; padding: 2px;">0</td> </tr> <tr> <td colspan="2" style="text-align: right; padding: 2px;">Subtotal:</td> <td style="text-align: right; padding: 2px;">750.00</td> </tr> <tr> <td colspan="2" style="text-align: right; padding: 2px;">50% Reduction if Small Entity Status:</td> <td style="text-align: right; padding: 2px;">0</td> </tr> <tr> <td colspan="2" style="text-align: right; padding: 2px;">Total:</td> <td style="text-align: right; padding: 2px;">750.00</td> </tr> </table> </div> </div> </td> <td colspan="2"></td> </tr> <tr> <td style="text-align: right; padding: 2px;">Date:</td> <td colspan="2" style="text-align: right; padding: 2px;">Name:</td> <td colspan="2" style="text-align: right; padding: 2px;">Signature:</td> <td style="text-align: right; padding: 2px;">Reg. No.</td> </tr> <tr> <td style="padding: 2px;">September 11, 2003</td> <td colspan="2" style="padding: 2px;">Stanley P. Fisher Juan Carlos A. Marquez</td> <td colspan="2" style="padding: 2px;"> </td> <td style="padding: 2px;">24,344 34,072</td> </tr> </tbody> </table>						THE FILING FEE IS CALCULATED AS FOLLOWS:				Basic Fee:	\$ 750.00	Total Claims:	18	-20 =	0	× \$18 =	0.00	Independent claims:	3	-3 =	0	× \$84 =	0.00	<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <b>REED SMITH LLP</b>                3110 Fairview Park Drive, Suite 1400                Falls Church, VA 22042                Phone: 703-641-4200 Fax: 703-641-4340             </div> <div style="width: 55%;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: right; padding: 2px;">Multiple Dependent Claim (Add \$280.00):</td> <td style="text-align: right; padding: 2px;">0</td> </tr> <tr> <td colspan="2" style="text-align: right; padding: 2px;">Subtotal:</td> <td style="text-align: right; padding: 2px;">750.00</td> </tr> <tr> <td colspan="2" style="text-align: right; padding: 2px;">50% Reduction if Small Entity Status:</td> <td style="text-align: right; padding: 2px;">0</td> </tr> <tr> <td colspan="2" style="text-align: right; padding: 2px;">Total:</td> <td style="text-align: right; padding: 2px;">750.00</td> </tr> </table> </div> </div>				Multiple Dependent Claim (Add \$280.00):		0	Subtotal:		750.00	50% Reduction if Small Entity Status:		0	Total:		750.00			Date:	Name:		Signature:		Reg. No.	September 11, 2003	Stanley P. Fisher Juan Carlos A. Marquez				24,344 34,072
THE FILING FEE IS CALCULATED AS FOLLOWS:				Basic Fee:	\$ 750.00																																																
Total Claims:	18	-20 =	0	× \$18 =	0.00																																																
Independent claims:	3	-3 =	0	× \$84 =	0.00																																																
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <b>REED SMITH LLP</b>                3110 Fairview Park Drive, Suite 1400                Falls Church, VA 22042                Phone: 703-641-4200 Fax: 703-641-4340             </div> <div style="width: 55%;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: right; padding: 2px;">Multiple Dependent Claim (Add \$280.00):</td> <td style="text-align: right; padding: 2px;">0</td> </tr> <tr> <td colspan="2" style="text-align: right; padding: 2px;">Subtotal:</td> <td style="text-align: right; padding: 2px;">750.00</td> </tr> <tr> <td colspan="2" style="text-align: right; padding: 2px;">50% Reduction if Small Entity Status:</td> <td style="text-align: right; padding: 2px;">0</td> </tr> <tr> <td colspan="2" style="text-align: right; padding: 2px;">Total:</td> <td style="text-align: right; padding: 2px;">750.00</td> </tr> </table> </div> </div>				Multiple Dependent Claim (Add \$280.00):		0	Subtotal:		750.00	50% Reduction if Small Entity Status:		0	Total:		750.00																																						
Multiple Dependent Claim (Add \$280.00):		0																																																			
Subtotal:		750.00																																																			
50% Reduction if Small Entity Status:		0																																																			
Total:		750.00																																																			
Date:	Name:		Signature:		Reg. No.																																																
September 11, 2003	Stanley P. Fisher Juan Carlos A. Marquez				24,344 34,072																																																